

Opioid Use Disorder (OUD) is defined as the chronic use of opioids that causes clinically significant distress or impairment. This resource provides information to help clinicians who identify, diagnose and refer individuals diagnosed with OUD.

Evidence-based treatment for OUD is available and typically includes FDA-approved Medication for Opioid Use Disorder (MOUD), commonly called Medication-Assisted Treatment (MAT), like buprenorphine, naltrexone and methadone combined with behavioral health therapy.

Substance Use Disorder 24/7 Helpline: 1-855-780-5955



Licensed clinicians are available 24/7 for:

- Local OUD and behavioral health evidence-based treatment identification (option 2)
- Education resources
- Community support services
- Care Advocate referrals for ongoing support (up to 6 months, when appropriate)

Need Help Now?



Call or text **988** for the Suicide and Crisis Lifeline for urgent mental health or substance use crises.

Call **911** for immediate life-threatening emergencies.

Opioid Use Disorder Statistics



- In 2022, among the 4% (approximately 9 million people), of the adults in the United States who needed OUD treatment only 25% (approximately 2 million people) received recommended medications ¹
- Nearly 108,000 people died from drug overdose in 2022 and approximately 82,000 of those deaths involved opioids (76%) ²
- The rate of overdose deaths involving synthetic opioids (primarily illegally made fentanyl and fentanyl analogs) increased approximately 4% ²

What's Inside

- OUD diagnosis and treatment – engaging with patients
- Provider and family resources
- OUD screening assessment

Note: FDA approval does not guarantee coverage by your health plan – please be sure to verify coverage based on your benefits

Sources: Dowell D, Brown S, Gyawali S, et al. Treatment for Opioid Use Disorder: Population Estimates — United States, 2022. MMWR Morb Mortal Wkly Rep 2024;73:567–574.

DOI: <http://dx.doi.org/10.15585/mmwr.mm7325a1> Spencer MR, Garnett MF, Miniño AM. [Drug Overdose Deaths in the United States, 2002-2022](#). NCHS Data Brief, no 491. Hyattsville, MD: National Center for Health Statistics. 2022

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OUD Diagnosis and Treatment Resources



There is improved adherence and patient engagement with both MOUD and behavioral therapy compared to patients receiving medicinal treatment alone. Available resources for both include:

MOUD specialists

Physicians/Psychiatrists
Physician Assistants
Nurse Practitioners

Behavioral therapy specialists

Psychologists
Psychiatrists
Nurse Practitioners
Licensed Clinical Social Workers

Speaking with Patients



The initial conversation can set the tone for a patient's willingness to consider recovery resources. Phrases can be effective or detrimental to patient engagement:

Positive language to begin the OUD conversation:

- As your doctor, I am concerned by your opioid use
- According to the assessment, this level of opioid use is likely causing harm to you and/or others
- OUD is a medical condition and help is available
- I'd like to discuss available recovery resources, if you're willing

Positive language if patient is unwilling to engage with recovery options:

- I hope you'll consider taking steps to better manage or stop using opiates
- I'd like to schedule a follow-up after you've had time to consider your options, how does that sound?
- If you decide at any time to engage with available help, you can call my office or the Substance Use Disorder 24/7 Helpline which is **1-855-780-5955**.

Referring Patients for Treatment



You can refer Optum members for treatment by [logging in](#) to the Provider Express secure portal using the Referral tool or calling Provider Services. Other treatment resources include:

- The Optum [Live and Work Well website](#) use the access code '**clinician**' for Information about medications that may help and:
- "[Find Expert Care](#)" options
- [Substance use support](#) resources
- [Find care](#) by zip code
- Local mobile crisis support [by state](#)

Note: "Clinician" is a general access code. Provider in-network status should be verified by calling the behavioral health number on the back of the member insurance card.



Provider Resources

<u>Resource</u>	<u>Description</u>	<u>Link to Information</u>
Treatment of Opioid Use Disorder Course	This 8-hour online course covers treating opioid use disorder using interactive, case-based learning to teach evidence-based practices and also provides the required education needed to prescribe buprenorphine.	ASAM eLearning: Treatment of Opioid Use Disorder Course
Treatment of Opioid Use Disorder for Pregnant Patients	This 8-hour, online course provides the education that is essential for providers to identify, assess, diagnose, and manage pregnant and postpartum patients with opioid use disorder (OUD).	ASAM eLearning: Treatment of Opioid Use Disorder for Pregnant Patients
CDC Clinical Practice Guideline for Prescribing Opioids for Pain (2022 Clinical Practice Guidelines)	The 12 recommendations are grouped into four areas of consideration: 1. Determining whether or not to initiate opioids for pain, 2. Selecting opioids and determining opioid dosages, 3. Deciding duration of initial opioid prescription and conducting follow-up, and 4. Assessing risk and addressing potential	Guideline Recommendations and Guiding Principles Overdose Prevention CDC
SAMHSA Overdose Prevention and Response Toolkit	Comprehensive toolkit on opioid overdose for providers, patients, families, and friends	Overdose Prevention and Response Toolkit SAMHSA Publications and Digital Products

Member/family Resources

ASAM Opioid Addiction Treatment –Guide for Patients, Families, and Friends	Information on assessing and treating opioid addiction, focused on patients, families, and friends.	ASAM Pocket Guidelines and Patient Guide - ASAM Opioid Patient Guide 2020
Shatterproof: Stronger than Addiction	Extensive content regarding addiction for patients, families, and friends	Shatterproof.org



Opioid Use Disorder Screening: DSM-5 Opioid Use Disorder Checklist

Instructions for use: Patient to indicate “yes” or “no” to each question. Tally results in each category and match results to screening severity scale.

Diagnostic Criteria Questions*	Yes or No	Notes
1. Opioids are often taken in larger amounts or over a longer period of time than intended.		
2. There is a persistent desire or unsuccessful efforts to cut down or control opioid use.		
3. A lot of time is spent in activities necessary to obtain the opioid, use the opioid, or recover from its effects.		
4. Craving, or a strong desire to use opioids.		
5. Recurrent opioid use resulting in failure to fulfill major role obligations at work, school, or home.		
6. Continued opioid use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of opioids.		
7. Important social, occupational, or recreational activities are given up or reduced because of opioid use.		
8. Recurrent opioid use in situations in which it is physically hazardous.		
9. Continued use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by opioids.		
10. Tolerance, ** as defined by either of the following: a) a need for markedly increased amounts of opioids to achieve intoxication or desired effect b) markedly diminished effect with continued use of the same amount of an opioid		
11. Withdrawal, ** as manifested by either of the following: a) the characteristic opioid withdrawal syndrome b) the same (or a closely related) substance is taken to relieve or avoid withdrawal symptoms		

An Opioid Use Disorder diagnosis requires that at least 2 criteria be met within a 12-month period

Severity Scale	Corresponding ICD-10 Code*
Mild = 2-3 Symptoms	305.50 (F11.10)
Moderate = 4-5 symptoms	304.00 (F11.20)
Severe = 6+ symptoms	304.00 (F11.20)
*Not to be used with intoxication, withdrawal and/or opioid mental disorders	

** This criterion is not met for individuals taking opioids solely under appropriate medical supervision. Substance Abuse and Mental Health Services Administration (SAMHSA). TIP 63: Medications for Opioid Use Disorder – Full Document. Page 5-20.

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